

## **GUIDELINES/PROCEDURES FOR SUBMITTING PRESCRIPTION REIMBURSEMENT REQUEST**

**Under a temporary Rule passed during the 2010 Legislative Session, the Office of Group Insurance will be providing assistance to those retirees age 65 or older whose prescription expenses are such that they fall into the coverage gap under their Medicare Part D prescription coverage. When a retiree has expended \$2,000 in the Part D coverage gap, they may be eligible for reimbursement of the next \$2,000 they spend for medications in the coverage gap.**

**This assistance benefit is valid for two years; calendar years 2010 and 2011. This document outlines the procedures for making a claim for reimbursement under this program.**

**You will need to provide the following information:**

- **A completed Petition for Reimbursement of Out-of-Pocket Prescription Costs on Medicare Part D Plan. (Enclosed)**
- **Proof that you are in the Part D plan coverage gap and have expended \$2,000 of the \$4,550 gap. This information can be provided by sending a copy of the Explanation of Benefits (EOB) sent by your Part D plan carrier, or receipts, or an itemized list from your pharmacy reflecting your out-of-pocket expenses in the coverage gap for the first \$2,000.**
- **A completed Retiree Prescription Drug Assistance Benefits Reimbursement Form, with receipts reflecting your out-of-pocket expenses beyond the initial \$2,000 for which you are claiming reimbursement**